

# Rural Healthcare Quality Network

A Clinical Forum Newsletter



## Medical Literature Review



RURAL HEALTHCARE QUALITY NETWORK

Quality Matters...

### Infectious Disease

*Question:* What stool finding strongly suggests the **absence** of an acute invasive bacterial GI infection (Campy, Shigella, Salmonella, Yersinia, E. coli)?

*Answer:* A negative stool for occult blood is strong evidence against invasive infection and indicates limited likelihood of benefit from empiric antimicrobial treatment.

*Source:* Medscape. *Pediatric Infectious Disease*

### Family Practice/Internal Medicine

*Question:* Keloids are more common in black and Hispanic patients with an incidence estimated between 5 - 15%. What is the most effective and widely used treatment?

*Answer:* First-line therapy is usually intraleisional steroid injection with triamcinolone acetonide.

*Source:* Medscape *Journal Medicine*. 2009;11(1):18

### Medication Management

*Question:* Does the addition of digitalis (0.25mg/day) reduce one year mortality and hospitalization rates in chronic heart failure patients (systolic and diastolic) who are currently taking both an ACE inhibitor and a diuretic?

*Answer:* Yes.

*Source:* *Digitalis Investigation Group Trial A.J. Cardiology*, 2009;103(1):82-87

### Urgent/Emergent Care

*Question:* Intravenous opiate treatment of pain in the ED is often underdosed. What is

a recommended initial dose of IV morphine for the treatment of moderate/severe pain?

*Answer:* Morphine, 0.10mg/kg. Thus, the average 70 kilo adult would receive 7mg of IV morphine.

*Source:* *Journal Watch. Massachusetts Medical Society*; 2007;6(5)

### Nursing Focused Care

*Question:* What is an effective, albeit expensive, treatment for excessive axillary, palm or foot perspiration when topical treatments fail?

*Answer:* Botox injections into the affected areas.

*Source:* Medscape *Nursing*, 2009

### Risk Management:

*Question:* What percentage of untreated, deep calf thrombi extend into more proximal veins?

*Answer:* Approximately 25% extend into proximal veins within 1 week. Thus, if untreated, the patient should have repeat venous duplex doppler within 1 week to assess propagation.

*Source:* *NEJM. July 15, 2004; pg. 268*

## Practice Pearl

**Question:** A patient presents with an apparent first episode of genital herpes. The patient insists they are in a monogamous relationship. How can this "new" infection be explained?

**Answer:** This situation often presents a sensitive clinical dilemma. A significant number of "first" clinical genital HSV episodes actually represent a recurrence of a previously unrecognized mild infection.

**Source:** *NEJM. May 6, 2004; pg. 1975*